

KENTUCKY STATE POLICE - CADET TROOPER APPLICATION FOR EMPLOYMENT

919 Versailles Road
Frankfort, Kentucky 40601

Application must be typed or printed legibly in ink. Submit Certified Copy of Birth Certificate with this Application.

Answer each item completely and accurately. Incomplete answers may cause delay in processing of application.

False answers will lead to dismissal.

Applicant Name _____
Last First Middle Maiden

Address _____
Street City County State Zip Code

Telephone _____ Driver's License # _____
Home Work State

Social Security Number _____ Are you at least 21 years of age? ☐ Yes ☐ No

HS Graduate ☐ Yes ☐ No ☐ GED US Citizenship Acquired By ☐ Birth ☐ Marriage ☐ Naturalization

Which of the following satisfies the application requirements:

☐ Sixty College Credit Hours (Copy of college or university transcript certified by the awarding institution required)

☐ Two Years Active Duty in the Military (Copy of DD214 required) or if still active, (Notarized letter from commander verifying length of service)

☐ Two Years Experience as a Sworn Full-Time, Law Enforcement Officer (Sworn statement from employer as to length of service required)

* Applicants may be required to complete an extensive background profile

All persons selected for employment by the Kentucky State Police as Cadet Troopers will be subject to a rigorous training program of twenty-two (22) weeks in duration. All cadets are required to live at the Academy during this training period and must adhere to all rules and regulations of the Kentucky State Police. Cadets will be appointed to the position of Trooper upon successful completion of the training program. Initial duty assignments will be made according to the needs of the Kentucky State Police. Officers may be assigned anywhere within Kentucky and may be subject to transfer at any time while employed in a sworn State Police position to any part of the state. Employment may be terminated with or without cause at any time during the training period or the probationary period of one (1) year immediately following appointment as a Trooper. All candidates who are selected for final employment consideration are required to provide a sample (blood/urine) for drug testing purposes. If employed as a sworn officer, submission to random drug testing will be mandatory during the course of employment. Additionally, polygraph examinations will be administered to candidates who are selected for final employment consideration.

I certify that I have read, understood and accept the conditions expressed in the foregoing paragraph. I further certify that all of the information I have provided on this application form is truthful and accurate to the best of my knowledge. I understand that my background will be extensively investigated by a Kentucky State Police officer and I consent to such investigation. The Kentucky State Police is an equal opportunity employer with strict prohibitions against any unlawful discrimination based upon race, sex, age, national origin, religion, disability, or political affiliation.

Signature of Applicant (as usually written)
To be signed in the presence of a notary

Date of Signature

Note: This application must be notarized in the space provided below.

Subscribed and sworn to before me by the above applicant, this _____ day of _____, 20 _____

Signature of Notary

Date

My Commission Expires _____,
MONTH & DAY YEAR

Kentucky State Police

EEO Data Information

We would like to have every applicant provide the information listed below, but you are not required to do so. This information will be used solely for purposes of research on our fair employment practices.

Name:

_____	_____	_____	_____
Last	First	Middle Initial	Maiden

Social Security Number: _____

Sex (check one)

☐ Male ☐ Female

Race/Ethnic Group (check one)

<input type="checkbox"/> 0 - Caucasian	<input type="checkbox"/> 2 - Hispanic	<input type="checkbox"/> 4 - American Indian or Alaskan Native
<input type="checkbox"/> 1 - African American	<input type="checkbox"/> 3 - Asian	<input type="checkbox"/> 5 - Other _____

Referral Source (check one)

<input type="checkbox"/> College/University	<input type="checkbox"/> State Police Trooper/Employee	<input type="checkbox"/> Radio/Television
<input type="checkbox"/> Job/Career Fair	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Other _____